



# ***FSA SOLUTION LIFE CYCLE (SLC)***

## ***Formal Signoff Document***



**Phase Name:**        **Construction**

**Deliverable Name:**   **Developed and Tested Solution Accepted**

**Responsible:**        \_\_\_\_\_  
                                 (Project Manager Name)

\_\_\_\_\_  
(Project Manager Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(IPT Representative Name)

\_\_\_\_\_  
(IPT Representative Signature)

\_\_\_\_\_  
(Date)